

69874

TECHNICAL STATUS REPORT

Work Assignment Number: RA-02

TDD No.: S05-0104-010

TDD Name: Dead Creek

EPA TDD Manager: Kevin Turner

Tetra Tech TDD Manager: [REDACTED]

Date: May 9, 2001

Reporting Period: April 2 through 29, 2001

TDD Completion Date: 12/31/01

Percent Work Completed (Hours): 1%

TDD Type: Removal PRP

Distribution: Lorraine Kosik, US EPA START Project Officer

Lisa Smith, US EPA START Contracting Officer

[REDACTED], Tetra Tech EM Inc. START Program Manager

1. **Progress Made This Reporting Period**

Tetra Tech attended a pre-construction kick-off meeting at the site on April 12, 2001 and reviewed project-related documentation. Financial and TDD management activities occurred during the reporting period.

2. **Problems Encountered and Resolved**

None.

3. **Deliverables Submitted**

Deliverable

Date Submitted

None

4. **Activities Planned Next Reporting Period**

Tetra Tech will tour the site with the Construction Manager and review the development of the TSCA cell.

5. **Costs Incurred But Not Invoiced**

None.

6. **Monthly Charges and Budget**

Tetra Tech has expended 6 level-of-effort (LOE) hours and \$ 358.55 during the reporting period. The cumulative expenditure through the reporting period is 6 LOE hours and \$ 358.55. The approved expenditure limit for the work assignment is 500 LOE hours and \$32,500.00 .

START II MONTHLY PROGRESS REPORT

Tetra Tech EM Inc.

Contract #68-W-00-129

Return To: Lorraine Kosik-SE/5J

EPA OSC: Kevin Turner

Site Name: S05-0104-010 / Dead Creek

Reporting Period: May 28 through July 1, 2001

Please review the attached monthly progress report to determine if the costs appear to be reasonable and allocable to your site. Check the appropriate box and provide me your comments in the remarks section. You may also use this opportunity to identify any performance problems or areas of concern in the contractor performance section below. Your review will aid me in processing the invoice payment. I would appreciate your cooperation in this endeavor and as always if you have any questions please contact me at 886-7580. Thank you.

Please return this form by **COB, August 3, 2001**, (if you are in the field do not worry as costs may be disallowed at any time, just please take a moment at some time to review and comment, if necessary). **PLEASE KEEP THE MONTHLY PROGRESS REPORT FOR YOUR FILE.**

☒ Sufficient progress has been made by the contractor to support payment for work performed during the period.

☐ Contractor must provide additional justification for the costs described below.

☐ Costs listed below should be withheld since they cannot be verified.

Remarks:

Contractor Performance: Please give specific examples under the remarks section if performance is above or below the satisfactory level.*

	5	4	3	2	1
Technical Competence	—	—	✓	—	—
Schedule	—	—	✓	—	—
Cost Control	—	—	✓	—	—
Management	—	—	✓	—	—

Remarks:

* 5 = Outstanding, 4 = Exceeds Expectations, 3 = Satisfactory, 2 = Deficient, 1 = Unacceptable